

PATENT



Docket No: 865-007us

IFW

Applicant(s) : Baird et al
Serial No. : 10/500,195
Filed : June 24, 2004
For : SYSTEM FOR DIGITAL USERS TO MANAGE RECEIVED ANALOG INFORMATION

Examiner: Cheng
Group Art Unit: 2625

PETITION AND FEE FOR EXTENSION OF TIME (37 C.F.R. §1.136(a))

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. This is a petition for an extension of time for filing an Amendment.
2. The communication in connection with the matter for which this extension is requested
☒ is filed herewith.
☐ has been filed on _____.
3. ☐ Applicant is a small-entity -- verified statement is attached ☐, or has already been filed. ☐.

- | | | <u>Total Months Requested</u> | <u>Fee for Other than Small Entity</u> | <u>Fee for Small Entity</u> |
|----|-------------------------------------|-------------------------------|--|-----------------------------|
| a. | <input type="checkbox"/> | one month | \$120.00 | \$60.00 |
| b. | <input type="checkbox"/> | two months | \$450.00 | \$225.00 |
| c. | <input checked="" type="checkbox"/> | three months | \$1020.00 | \$525.00 |
| d. | <input type="checkbox"/> | four months | \$1590.00 | \$795.00 |
| e. | <input type="checkbox"/> | five months | \$2,160.00 | \$1,080.00 |
- f. ☐ An extension for _____ months has already been secured for filing the above-identified communication and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested. The fee for this extension (\$ _____), minus the fee previously paid (\$ _____) equals \$ _____ (total fee due).
5. ☐ A check in the amount of \$ _____ to cover the extension fee is attached.
 6. ☒ Charge \$525.00 to Deposit Account No. 19-2825 Order No. 865-007U.
 7. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required by this paper, or credit any overpayment to Deposit Account No. 19-2825. Order No. 865-007u.

Dated: June 19, 2008

Mailing Address:
317 Madison Avenue
New York, New York 10017
(212) 697-2800;
Fax (212) 697-3004

Respectfully submitted,
SOFER & HAROUN, L.L.P.

By: _____
Joseph Sofer
Registration No. 34,438
Customer No.: 39600

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PATENT

Docket No. 865-007u

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Baird et al
Serial No. : 10/500,195
Filed : June 24, 2004
For : SYSTEM FOR DIGITAL USERS TO MANAGE RECEIVED ANALOG INFORMATION

Examiner: Cheng
Group Art Unit: 2625

CERTIFICATE OF MAILING (37 C.F.R. 1.8a)

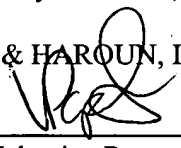
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I hereby certify that the attached Amendment, Amendment Transmittal, Petition for Three-Month Extension of Time, Check for \$525.00, and Return Postcard, along with any paper(s) referred to as being attached or enclosed and this Certificate of Mailing are being deposited with the United States Postal Service on the date shown below with sufficient postage as first-class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450 Alexandria, V.A. 22313-1450.

Respectfully submitted,

SOFER & HAROUN, L.L.P.

By: 
Valentina Papraniku

Date: June 19, 2008

Mailing Address:

SOFER & HAROUN, L.L.P.
317 Madison Avenue, Suite 910
New York, New York 10017
Tel:(212)697-2800
Fax:(212)697-3004
Customer No.: 39600



PATENT

Docket No. 865-002uIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Baird et al Examiner: Cheng
Serial No. : 10/500,195 Group Art Unit: 2625
Filed : June 24, 2004
For : SYSTEM FOR DIGITAL USERS TO MANAGE RECEIVED ANALOG INFORMATION

AMENDMENT FEE TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

☒ No additional fee is required.☐ The additional fee has been calculated as shown below:CLAIMS AS AMENDED

	Claims Remaining After Amendment		Highest No. Covered by Previous Payments	Present Extra	Rate	Additional Fee
Total Claims*	31	-	31	=0	x \$50.00	\$ _____
Independent Claims	4	-	5	=0	x \$200.00	\$ _____
Multiple Dependent Claim(s)	(If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$260.00 to additional fee.)					\$ _____
					Total:	\$ _____

☐ Verified Statement of "Small Entity" Status Under 37 CFR § 1.27
filed _____. Reduced Fees Under 37 CFR § 1.9(f)
(50% of total) paid herewith.

\$ _____

* Includes all independent and single dependent claims and all claims referred to in
multiple dependent claims. See 37 C.F.R. § 1.75(c).

- ☐ Charge fee to Deposit Account No. 19-2825 . Order No. _____
A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for this amendment, or credit any overpayment to Deposit Account No.19-2825. Order No. 865-007u.
A DUPLICATE COPY OF THIS SHEET IS ATTACHED.
- ☐ ____ Page(s) of substitute Sequence Listing
- ☐ ____ Computer disk(s) containing substitute Sequence Listing
- ☐ Statement under 37 C.F.R. § 1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.
- ☐ A check in the amount of \$ _____ to cover the filing fee is attached.

Respectfully submitted,

SOFER & HAROUN L.L.P.

Dated: June 19, 2008

By: _____

Joseph Sofer

Registration No. 34,438

Mailing Address:

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